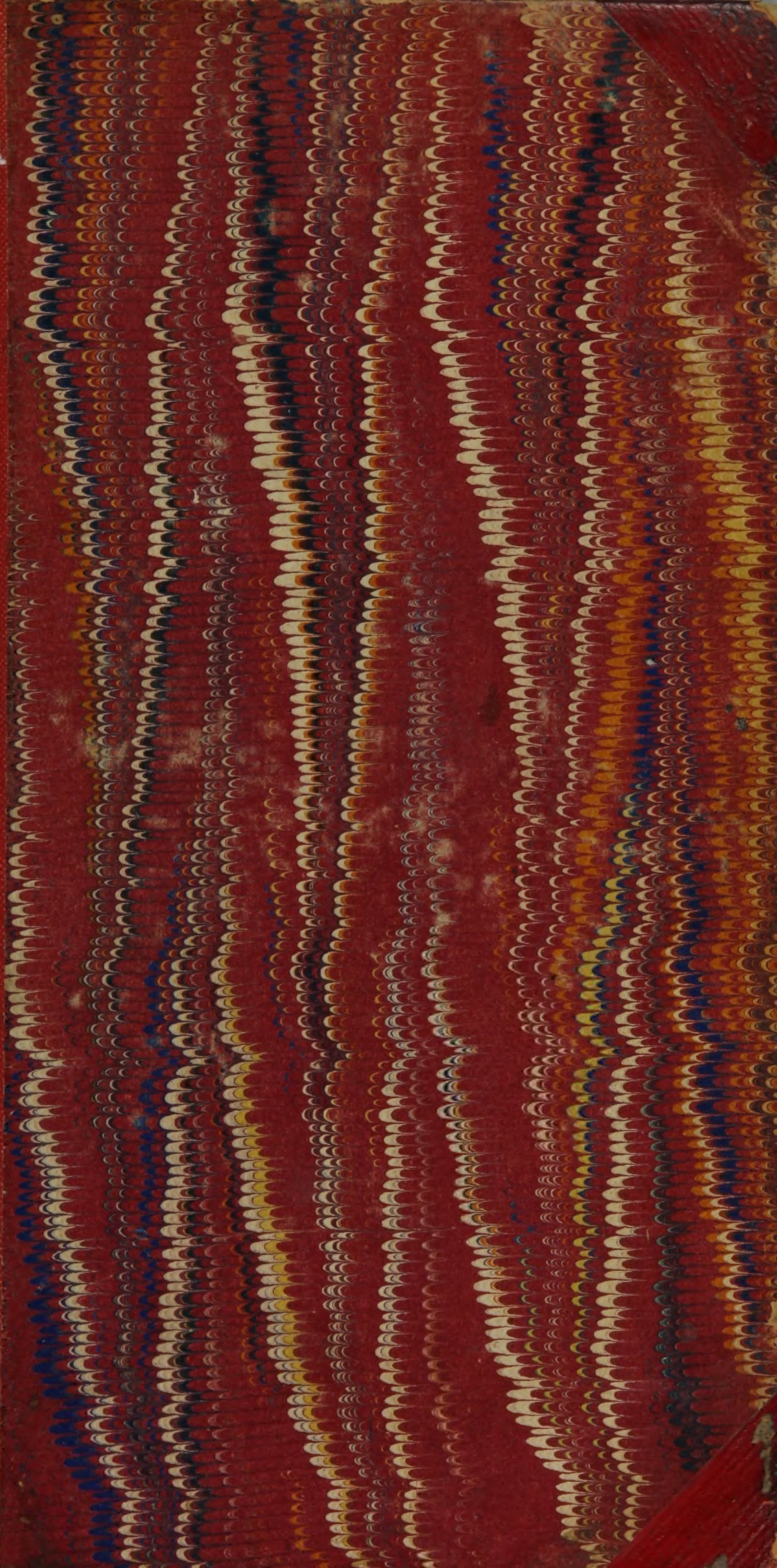


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A N S W E R

TO

DR. A. RUPPNER,

WITH A REVIEW AND CRITICISM ON HIS RECENT REPORT OF A
CASE OF

LARYNGO-TRACHEOTOMY,

*INCLUDING ALL THE ATTESTED FACTS REGARDING
THE RECENT PARTRIDGE POISONING CASE
AT THE FIFTH AVENUE HOTEL.*

BY

LEWIS A. SAYRE, M. D.,

PROFESSOR OF ORTHOPEDIC SURGERY BELLEVUE HOSPITAL MEDICAL COLLEGE, SURGEON AT
BELLEVUE AND CHARITY HOSPITAL, ETC., ETC.

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To the President and Members of the American Medical Association, and the Medical Profession.

GENTLEMEN : As one of the Vice-Presidents of this Association, and Chairman of its Committee on Ethics, my character should be above reproach, or at least capable of withstanding the strictest professional scrutiny.

Within a few weeks past a pamphlet has been published, and very extensively circulated among the profession and the public—including the daily and weekly press, and the public libraries of the country—by A. Ruppaner, M. D., who adds to his name “member of the American Medical Association.”

In this pamphlet I am accused of the most gross violation of the code of ethics; which charges, if true, should certainly remove me in disgrace from my present position as one of the officers of this Association. It is due to me—it is due to the Association—that these charges should be investigated by impartial and disinterested parties, and reported upon to this convention, as to their truthfulness or falsity.

I therefore very respectfully but most earnestly request that the subject be referred to some new Committee on Ethics, or to a special committee to be appointed by the chair, with instructions to report to this convention, at the earliest practicable moment.

All of which is most respectfully submitted.

LEWIS A. SAYRE, M. D.

Chairman Committee on Ethics.

May 3, 1870.

This petition was referred to the Committee on Ethics, of which Dr. Stillé, of Philadelphia, was chairman—Drs. Davis,

of Chicago; Askew, of Delaware; Keller, of Kentucky; and Dr. Woodward, of the Army, composing the committee.

The committee, having their time so occupied with the contesting delegates from the District of Columbia that they could not investigate the subject, and as Dr. Ruppaner was not present, returned the paper, with the request that it be referred to the local Medical Society of New York, for adjudication.

Dr. Murphy, of Ohio, stated that, as the slander was made by a man who, in the same pamphlet in which he published the slander, had confessed that he had before published two falsehoods, he was therefore unworthy of credence, and could do my professional character no harm. Dr. Maddox, of Maryland, then moved that the whole subject be laid upon the table.

Having learned subsequently that Dr. Ruppaner was a member of the New York County Medical Society, Dr. Hibbard, of Indiana, moved to take it from the table, and refer it to the New York County Medical Society, which was done.

I have, therefore, in accordance with this resolution, prepared the following narrative of *facts*, and present it to the New York County Medical Society for their official action—and publish the same for the information of the profession and the public:

In the March number of the NEW YORK MEDICAL JOURNAL, 1870, I published a review of Dr. Ruppaner's article upon "Laryngo-Tracheotomy," published in the January number of the same journal, for the reason that, in one of the cases published by Dr. Ruppaner, he claimed to have performed an operation which I performed myself, and stated that, in the "opening of the trachea and inserting the tube, no untoward circumstance occurred," whereas the hæmorrhage and the insufflation of the blood were so great as to endanger

life for some minutes; and, therefore, it became my duty, in justice to science, and to the profession, to correct this erroneous statement. So far as his claiming to have performed the operation alone was considered (which was false), I should have paid no attention to it had he given a correct account of the operation itself, and the hæmorrhage that occurred at the time the trachea was opened.

This latter accident was aggravated very materially from the fact that no suitable instruments were at hand to retain the trachea open, in order to insert the tube, which by its presence and pressure might have prevented the hæmorrhage; and, as this point is not emphatically dwelt upon by our authorities upon the operation as distinctly as it should be, *I deemed it my duty to draw attention to the fact, in order that operators in future might be especially upon their guard at this particular point in the operation*, which is in fact the only point of danger in it, namely, the invaginating of the incision, from the excessive desire to obtain air by a man who is suffocating; and at the instant the opening is made the inspirations are so strong that, unless you are prepared to retract the opening by proper instruments, there is great danger of immediate suffocation. *It was to draw the attention of the profession to this particular point that I made my review of Dr. Ruppaner's paper.*

The doctor, it seems, cannot understand a professional criticism in any other sense than that of personal and pecuniary advantage, for he has replied to it, and states that the question will reduce itself simply to this: "Were you intentionally injured in my report; have I tried to correct my error?" I never claimed to be either intentionally or unintentionally injured. It was *science* and *truth* that were injured, not myself personally. I had no personal interest in the matter.

The doctor, in his review, now states that he always considered that the tumor was malignant, and denies having told me that it was not malignant. I repeat my assertion that he informed me that he had made microscopic examination of the pieces of the tumor, and ascertained them to be non-malignant; and, in proof of this assertion, I refer to his treatment, which he had pursued for months, that *he believed at*

that time that it was non-malignant ; for I cannot believe him so ignorant of all the well-established principles of treatment as to think that he would assume to treat a cancer successfully by constantly tormenting it with irritants and escharotics. The very plan therefore, which he had been pursuing for some months, is an evidence conclusive that at that time he considered it non-malignant. I also refer to the second letter of Mrs. Bigelow, in which she states that the doctor positively assured her husband that it was *not malignant*. Viewing it myself as non-malignant at the time, accepting his description, I suggested its removal ; whereas, if I had deemed it malignant, I should have simply suggested tracheotomy as a means of temporary relief. In my review, I state, I heard nothing from it further until I received a telegram at Long Branch, which telegram I simply quoted from memory, stating, “ the captain is dying, come immediately, he must be operated upon at once. A. RUPPNER.”

The exact telegram, as the doctor states, copied from the books of the telegraph-office, is :

DR. L. A. SAYRE, Mansion House, Long Branch : “ Come immediately, Bigelow must be operated upon at once.”

Now, mark—the simple addition of “ the captain is dying ” is the difference between the two, and it is remarkable that, having been made simply from memory, it should be so accurate as it is.

The fact that he was dying, and made therefore the necessity for the operation, may possibly account for my mistake in adding that conclusion to the telegram. I had no copy of the telegram, it was merely one from memory.

The doctor states that after the first consultation we had several conversations about it, and that I expressed a great desire to see it. That is true ; it was a case of professional interest, and I was very anxious to see him perform the operation. But he states that I had been engaged to perform the operation—had agreed to do it ; that he had so told the captain, and also Mrs. Bigelow, on the very day of the operation, and their friends. If that is true, so much greater the crime of his wilfully stating that *he* had done it himself. I most un-

hesitatingly state that, so far as I am concerned, he never requested me to perform the operation until a few moments before it was done; and, so far as the falsehood of his statement in regard to Mrs. Bigelow and the captain, I refer to the letter of Mrs. Bigelow, and to the published report of Dr. Ruppaner in the January number, as marked by Captain Bigelow himself before his death; and more especially to that part of Mrs. Bigelow's letter where she states that the captain himself "*marked these untruths.*"

As another proof that I certainly did not expect to perform the operation, is the fact that I went to it without any instruments whatever, except my ordinary pocket-case, which I always carry, and, but a few moments before the operation accidentally meeting Dr. Vance, informed him that Dr. Ruppaner was going to perform the operation of laryngo-tracheotomy, and asked him if he wished to see it; that if he did, I would see if I could get him an invitation, and went and obtained from Dr. Ruppaner permission to invite him. If I were to have performed the operation myself, I certainly would have felt at liberty to invite Dr. Vance, or anybody else whom I liked; and most certainly, if I were going to perform so serious an operation as tracheotomy, and the removal of a tumor from within the larynx, I should have taken a proper number of assistants with me. I again repeat that the first idea I had that I was expected to perform the operation was, when Dr. Ruppaner made the suggestion to me to perform it for him, a very few moments before it was done. His statement that I said, "Just let me know, as we progress with the operation, what you wish done, and I will do it," I pronounce as most unqualifiedly false.

The doctor lays great stress upon my regarding this as an operation of magnitude. I am aware of the simplicity of simple tracheotomy, and, probably having performed it as many times as Dr. Ruppaner, am fully competent to judge of its magnitude or simplicity; but, when tracheotomy is commenced with an idea of being extended to the removal of an intra-laryngeal tumor, and is complicated by the necessity of puncturing *through* a *vascular* tumor before you reach the air passage (see Dr. Cheever's letter), it is an entirely different

operation from simple tracheotomy, and its magnitude will be properly recognized by every competent surgeon.

1267 WASHINGTON STREET, BOSTON, }
April 10, 1870. }

DEAR DOCTOR:

I gladly embrace the opportunity to send you, through our mutual friend, Dr. Brown, a brief account of the later hours and autopsy of your patient, Captain Bigelow. I attended him from January 1st to March 26th, when he died. The tumor had then attained the size of a duck's-egg, and projected so much externally that it constantly pushed out the tube, which had to be lengthened from one-quarter to one-half an inch every three weeks. The last tube he wore was three and a half inches long. A week before death, sloughing began and soon destroyed the tumor down to a level with the skin. He did not die of suffocation, as he had feared, but of exhaustion, consequent on mal-nutrition, diarrhœa, and hæmorrhages. The autopsy was made twenty-seven hours *post mortem*. Dr. Ellis was present. The tumor surrounded the larynx, and had pushed forward the hyoid group of muscles. Externally, it nearly touched the sternum. Internally, it extended down very slightly beyond the cricoid cartilage. It did not pass beyond the third ring of the trachea. *The tube was through the lower edge of the tumor*, between the cricoid and third or fourth rings of the trachea. The trachea was intensely congested, but clear. The tumor had sloughed inside and out. It blocked the glottis, the vocal chords being covered and much altered. The ventricle of the larynx was invaded. The tumor had sloughed through into the pharynx on the right side. The epiglottis and tongue and throat were free.

Pieces of the tumor were submitted to two microscopists, who pronounced it cancerous. The specimen is preserved in the cabinet of the Boston City Hospital.

Very truly yours,

DAVID W. CHEEVER.

Dr. Sayre.

The doctor again asserts that "two tenaculums were on hand, and Dr. Dudley asserts that one of them was too weak." I again affirm that this weak tenaculum, to which Dr. Dudley refers, was the one taken from my pocket-case, which was not therefore present at the operation, except in my pocket, requiring some time to be obtained before it could be used; and the proof of it is the fact that Dr. Dudley in his letter states that he "used the open ring from the handle of my scissors out of my pocket-case to retract the opening, after finding that this tenaculum was too weak." How could Dr. Dudley have obtained the hook from the scissors of my pocket-case, unless I had previously removed it from my pocket?

The doctor acknowledges that he neglected to refer to the hæmorrhage which occurred, but states that in the original draft of his report he wrote: "No untoward event happened when the incision was made and the canula introduced, *except some hæmorrhage, the unavoidable result of the vascularity of the tumor.*" The latter part of this sentence, he says, by some unfortunate mishap, he neglected to copy in the manuscript for the press. *This, which is really the only important part of the whole operation to be neglected, is certainly most extraordinary.* It is like the playing of Hamlet, and, on the particular evening of the play, Hamlet is entirely left out.

The doctor next finds fault with my corresponding with *his* patient, and says: "Shortly after the operation, I became aware that you were working up *my* case." After having published that he performed the operation, and now stating that I did it, and that he and Bigelow expected me to do it, I am at a loss to understand how he can call it *his* case. Having performed the operation myself, I certainly had the professional right to claim the operation as my own, and the professional right to watch and keep an interest in it. But his statement that I corresponded with *his* patient is not true, as will be seen by reference to Mrs. Bigelow's second letter, with the single exception of writing him a respectful answer, to a very long communication which I received from him, most of which I had copied and sent to the doctor, and from which I think he obtained his first ideas of its malignant character, and in which letter the captain refers to the doctor's want of honor, which letter I have not published in full; but do now respectfully refer to the committee his letter on that subject.

(Mrs. Bigelow's First Letter.)

92 SHAWMUT AVENUE, BOSTON, *April 19, 1870.*

DR. L. A. SAYRE—

DEAR SIR: I have just received a note from Dr. Cheever with your letters to him of the 15th enclosed, in which you say "you have written to me at New Braintree, but have not received any answer." I have not received the letters, therefore the cause of my silence. I will write you the desired information as soon as I am able. When Dr. Ruppaner's report appeared in the NEW YORK MEDICAL JOURNAL, Captain Bigelow read it and

marked the untruths in it, and I have loaned it to a medical friend, and when I get it again I will write you our experience with, and regard for, Dr. Ruppaner, which is not as pleasant as we hoped it might be, when we first made his acquaintance. I should be pleased to hear from you before I leave here, which will be one week from next Friday. If there is any thing *particular* which you wish to know I shall be glad to give you all the information I can. With grateful remembrance, I am,

Yours respectfully,

JULIA E. BIGELOW.

As I intended presenting the whole controversy to the American Medical Association for adjudication—which was to meet in Washington on the 3d of May—I wrote to her to forward me the copy of the MEDICAL JOURNAL above referred to, and received the following reply :

(*Mrs. Bigelow's Second Letter.*)

MILBURY, MASS., Monday, 3 P. M., *May 2*, 1870.

DR. L. A. SAYRE—

DEAR SIR: I have just received your letter of April 28th, forwarded from Boston. I hasten to answer, and fear you will not receive it in time to do you any good.

After you were called by Dr. Ruppaner to examine Captain Bigelow's throat the first time, Captain Bigelow asked Dr. Ruppaner, what you meant by asking if it was malignant, not quite understanding the term.

Dr. Ruppaner explained, and said positively *that it was not malignant*, but never gave him to understand really what it was, only that it *appeared* like what is called a *cauliflower growth*. You were called the second time in consultation, and, after you were gone, Dr. Ruppaner says: "That man" (speaking of you) "is one of the best surgeons in the city, and if there is an operation to be performed on your throat, Bigelow, I shall call him to assist in doing it." I was present and heard him say it. That was just before we went to Norfolk, Virginia.

We spoke of you to our friends, and they all spoke in the highest terms of your skill as a surgeon, and we were quite at ease in our minds afterward. On our arrival in New York, August 13th, Captain Bigelow called on Dr. Ruppaner (Dr. Parish from Portsmouth, Virginia, was with him, having accompanied us to New York, as it was not considered safe for me to come alone with him), and was told that something must be done immediately, and that he would send for you, and the time was set on Monday, twelve o'clock, August 16, 1869.

Dr. Ruppaner got vexed at what Captain Bigelow said to him, Saturday morning before the operation, about something our Boston friends had said about him (Dr. Ruppaner), and in the evening sent for me to call

at his office, as he desired to talk with me. I went, and he then told me after what the captain said to him that morning, concerning our Boston friends' opinion of him: *he should never touch a knife* to Captain Bigelow's throat; that he wished to *drop* the whole *affair* and *case*, just where it was, and we might get who we liked, and our Boston friends might manage the whole business to please themselves.

Not knowing the man as well as I do now, I hardly knew what to say, but finally told him something must be done for Captain Bigelow, and if he chose to drop the case somebody would be called, he could not live as he was but a very short time. Then Dr. Ruppaner said to me: "But if it is your wish I should go on, and do for the captain, I will, but I will on no account whatever put a knife to his throat."

I told him, from what I had heard of your skill, I was satisfied to have you perform the operation, and he said he would be then at our rooms at the time set, and assist you, as he had already sent for you, to come from Long Branch.

We saw nothing more of him until he came in, instruments in hand, at the time set on Monday. Our friends, Mr. Hobart, and Mr. Worthley, remained in the room, but were told by Dr. Ruppaner to go out. They did not, as they afterward said, they "did not wish to leave Captain Bigelow alone, without a friend near him." Dr. Parish and Dr. Martin were present all the time, and both stayed a few days with us after the operation. Dr. Ruppaner did not dress the throat once. He assisted in removing the tapes, the first time. I did it myself as long as he lived.

We questioned Dr. Ruppaner about the operation, and all we could get from him was: "Captain, you behaved splendid, every thing was all right, and in a few days you go home, to your country place, in Massachusetts, and wait until I send for you, and we will then see what can be done about removing that thing in your throat, for you will then be stronger, and better able to bear it than you are now, it is useless to make another attempt right away." He never answered our questions satisfactorily to any of us (*Captain Bigelow*, myself, and our sister *Mrs. Harding*), and about that time Dr. Ruppaner left the city, and was very anxious to have us go as soon as he did, but we did not choose to leave New York until we knew something about the operation. You had not called on us since the operation, and *knowing* that you used the knife, and did the most of the work, we ventured to call upon you at your office, and ask you for the particulars of the operation, which you kindly gave, and manifested surprise at our not knowing any thing about it from Dr. Ruppaner.

You never wrote to Captain Bigelow, except in reply to his letter.

Dr. Ruppaner claimed that he *assisted* you in the operation. He always told Captain Bigelow that the tumor *was not malignant*. I cannot send you the report that Captain Bigelow marked, as it is in my trunk, which lies at the railroad station at West Brookfield.

I left Boston last Friday, and stopped here over the Sabbath, on my way to my home in New Braintree, Massachusetts.

I intended writing you as soon as I arrived there, as I was not able before I left Boston, being very weak and nervous, for I took the entire care of my husband night and day, while he was spared to me.

In the report Dr. Ruppaner says he put down a *concealed knife*, and cut into the *tumor*. *He never did it*. He showed the instrument to Captain Bigelow, and said he would like to try that.

He put the forceps down but *once*, but did not succeed in removing anything, but made the tumor bleed profusely. He applied what he called "hell-fire," Vienna paste.

I was with Captain Bigelow; he appeared more nervous than I had ever seen him before, and what we both did for him brought his breath back again, but he was never as well after it.

On receipt of your letter to-day, I was sorry that I had not taken the reports with me, and then I could have sent them to you; but as it is now, I do not think I can possibly get this letter to you in Washington in time, and shall send it to your house in New York.

Captain Bigelow *lost all confidence* in Dr. Ruppaner, and I can safely say he has not a very good reputation in Boston, and what he says of you will not injure you in the estimation of the *Boston friends*, and Captain Bigelow always felt that, through *your* skill, his life was saved. He lived to settle all his worldly affairs, and to prepare his mind for a final separation from those he so fondly loved, and to be fully reconciled to God's will, for "His will, not ours, be done." I will give you the address of some of our friends who were present at the time of the operation, and if you like to communicate with them you can do so. George H. Worthley, care Cyrus Wakefield, Esq., Boston, Mass.; Dr. S. R. Martin, North Brookfield, Mass.: Dr. James Parish, Portsmouth, Va., and Joseph Hobart, Esq., 189 Broadway, New York City.

Regretting that I did not receive your letter in time for the answer to reach you while in Washington, and hoping that this matter may be settled to your satisfaction,

I remain yours, gratefully and respectfully,

JULIA E. BIGELOW.

By E. W. PEIRCE.

I did not receive the promised pamphlet until a few days since, when her friend called and left it with the following letter:

(*Mrs. Bigelow's Third Letter.*)

NEW BRAINTREE, MASS.,
Tuesday, May 17, 1870. }

DR. L. A. SAYRE—

DEAR SIR: I wrote you from Milbury two weeks ago, but was not able to send you the MEDICAL JOURNAL, containing the report of my husband's case, as I did not have it with me.

Yesterday an acquaintance from New York called to see me, and, saying he should return there this week, I asked him if he would take the book to you for your perusal. He very kindly said he would do so, and you will there see the *untruths marked by Captain Bigelow's own hand*, and judge something what his feelings were toward Dr. Ruppaner. I would like the book returned to me, as I desire to keep it for reference, for he marked it for me at my request. I have all the correspondence between Dr. Ruppaner and Captain Bigelow, which, if necessary, you can have at any time. I do not think that what Dr. Ruppaner can say about you will injure you in Boston, but he has not *raised* himself at all there, since these reports appeared, for I have never heard a word spoken in his favor, and he is *well known there*.

I shall be glad to hear that the affair is settled satisfactorily to yourself. Trusting that it will be, I remain, yours respectfully,

JULIA E. BIGELOW.

The side notes in small print are copies of Captain Bigelow's notes on the report, and the italicized sentences refer to what he considered untrue.

CASE III.—*Large malignant tumor, involving the infraglottic space and trachea; cough, dyspnœa, aphonia, danger of suffocation, attempt at extirpation; laryngo-tracheotomy.*

Mr. B——, of B——, Mass., aged about thirty-six or forty, sea-captain, was sent to me for examination by his physician, Dr. Swan, of the Astor House, New York.

HISTORY.—Has always enjoyed good health, for a man subject to the exposures and hardships of his calling. Three years ago he was shipwrecked. In consequence of several days of extreme exposure and hardships in the endeavor to save ship and cargo, his health became impaired, manifested by the advent of cough and occasional loss of voice. After shorter or longer periods, sometimes with, sometimes without treatment, he recovered his voice, though each renewed attack left its traces behind; its quality became more and more impaired. Although he placed himself again under treatment, the hoarseness increased, till most of the time he could only speak with a whisper.

Have been doct-
tering, with loss
of voice most of
the time, since
November, 1863;
was wrecked No-
vember, 1868.

In this condition Captain B. presented himself at my office, March 23, 1869, for examination.

CONDITION.—Body well developed and finely proportioned; chest large and movements regular; breathing vesicular; no developed disease; heart normal. The external region of the larynx presented nothing abnormal; slight pressure on either side, or upon the anterior surface, caused no particular pain. Pharyngeal mucous membrane moderately congested; no effusion; no evidence of recent or old ulcerations. Inspiration easily

audible, accompanied by a peculiar shrill sound. Voice gone; able to whisper only. General health good; appetite fair; sleeps well.

LARYNGOSCOPIC EXAMINATION.—Epiglottis depressed posteriorly, so as to hide from sight one-third of the contour of the supraglottic space; its free border and apex show traces of recent ulceration; anterior surface slightly inflamed; posterior surface much more so. Owing to the depressed and irritated condition of the epiglottis, some days elapsed before a complete view of the interior of the larynx could be obtained. These obstacles removed, the ary-epiglottic folds, ventricles, and false vocal cords, were found to be congested. The right vocal cord presented a dirty-gray color, yet normal in its action. The left vocal cord, on the contrary, remained stationary, held back by a grayish red-looking mass attached to its lower surface. During the act of expiration, when told to pronounce the letter *ā*, or to shout, or to laugh, the free border of this mass, smooth, thin, readily moving to and fro, was clearly seen to project forward and upward into the free space of the glottis, obliterating it almost entirely. Upon *inspiration*, this same part of the growth, the base of which was clearly attached to the left wall of the trachea, would sink back again into the space below, leaving the free space in the glottis larger than during expiration. The vibratory motion of this part of the growth might fitly be compared to the opening and shutting of a valve.

Fig. 4 (see plate) represents the glottis during the act of expiration with that portion of the growth exposed to view, as I demonstrated it to numerous medical gentlemen on different occasions at my office—among them Drs. Swan, Sayre, Dunster, Dudley, Cooper, Kinney.

DIAGNOSIS.—*From the first I was inclined to regard this growth as very dangerous in character and malignant in type. Appearance, rapidity of growth, position, symptoms, all were against the case. Still I hoped to be able to arrest the disease in its progress upward, by removing with instruments portions of it, and by local applications to keep its growth in check. My great fear was its downward progress—its descent into the trachea—and then already suggested the possible necessity of the operation of tracheo-laryngotomy.*

Subsequent results still more confirmed my apprehension. Whenever an instrument was brought in contact with the mass in situ, it bled readily—*profusely at times. Pieces of the size of a large pin's head were removed with the forceps, and also coughed up at intervals by the patient, followed always by hæmorrhage. Much may have been expectorated, as often the sputa were tinged considerably with blood.*

The portions, after being removed or expectorated, when examined, were of a lobular, cauliflower appearance, of a soft, lardaceous consistency, and of a grayish-red color. *Examined under the microscope, these lobules were found to consist of cancer-cells, varying in type, some being oval, some round, others globular, with distinct nuclei, in some two, and more in others.*

Considering, then, these specific characteristics described with the rest of the symptoms collectively—pain, tendency to hæmorrhage, color, con-

sistency, form, and rapidity of growth—the carcinomatous nature of the tumor was established beyond a doubt.

PROGNOSIS.—Unfavorable.

TREATMENT.—To remove as much as possible of the growth, *per vias naturales*, thereby relieving the aphonia and dyspnœa, and later, if necessary, and as seemed most probable, to have recourse to laryngo-tracheotomy, should the growth encroach too rapidly upon the free space of the trachea.

After a week's practice with the mirrors, the irritability of the fauces was in a great measure overcome, and I had no trouble to demonstrate the neoplasm to my medical friends.

I touched the larynx daily with Lugol's solution, bringing the brush directly to bear upon the mass, which, after a short time, seemed to contract under its use. Captain B. began to speak louder, and to breathe freer, nor was there any pain in swallowing at that time. Dr. Swan, who saw the patient from the first, was also of opinion that the tumor grew smaller and the voice more powerful. This latter fact was apparent to all of the captain's friends.

During a temporary absence of the patient the good accomplished was nearly lost. Then I decided to use the forceps to remove what I could of the growth. *My efforts in that direction were, however, arrested by the profuse bleeding that followed each time small lobules were torn away. I next resorted to decision of the part in situ. Several incisions were made at the favorable moment with the catheter-shaped, covered lancet of Tobold. Hæmorrhage followed; the next day the part in situ showed signs of suppuration. The result of this operation was gratifying, as the patient, after a few days, when the result of the incision became evident, gained again in voice, and his breathing was much relieved.*

Fig. 5 (see plate) represents the larynx with the tumor in situ in the glottis, after the operation of decision.

Still another relapse followed, accompanied by considerable difficulty in swallowing. I became more and more satisfied that, although I was opposing the enemy with considerable success in its progress above, the disease was, at the same moment, rapidly encroaching upon the trachea. This truth was still more forcibly brought home to me by the appearance, in the latter part of July, of an enlargement in the left side of the trachea, increased sensibility upon pressure, greater difficulty in swallowing, and a feeling, when lying down, as if something loose was hanging from its attachment on the left to the right side. Pain in the left ear, dizziness in the head, increased paroxysms of coughing, and profuse expectoration, were now added. No wonder the captain became at times alarmed about himself. I now had recourse to the application of chromic acid, followed by some relief, at least, of the distressing symptoms. Business called him repeatedly to Norfolk, Virginia, in June, July, and August, though he paid me visits from time to time. Owing to the increased gravity

"Vienna paste," or "hell fire," as he called it. The experiment nearly cost life on the spot.

of the case, I laid before him the necessity of an operation (extra-laryngeal, but could not get his consent at the time.

August 13, 1869.—Captain B. arrived by steamer from Norfolk, in company of Dr. Parish, late surgeon on the staff of General Lee. Dyspnoea, cough, paroxysms of strangulation, and inability to swallow food, had become so alarming that the doctor had to accompany the captain. Countenance livid, hands cold, pulse weak, nervous system prostrated, expression anxious: such was his condition.

August 16.—OPERATION OF LARYNGO-TRACHEOTOMY.—*My friend, Dr. L. Sayre, who had seen, at my request, the patient at a former consultation, consented to divide with me the responsibility and to aid me with his experience and skill in performing the operation, so as to give me free scope for observing the course, position, extent, and nature of the tumor, and to direct such a course as the progress of the operation might demand.* I had also the valuable assistance of Drs. Dudley, Parish, Swan, Zolnowski, and several others.

It had been decided upon to perform, first, tracheotomy, so as to give the already much-exhausted patient an opportunity to breathe freer; then to divide the thyroid and cricoid cartilages in the median line in order to reach the tumor, and to extirpate if possible, if not the whole, at least part of it. When the larynx and part of the trachea were exposed to view, after careful dissection of the adjacent parts, the trachea, as far down as the sixth ring, was found to be enlarged, principally on the left side, though the enlargement extended across the median line about half an inch. To the touch this enlargement was rather hard and immovable. None of us had anticipated that the growth had progressed to such an extent into the air-passage below. The chances for a successful termination of the operation had nearly vanished. To attempt to remove the tumor in the then exhausted condition of the patient, coupled with the additional danger involved on account of the extent of the disease and the parts affected, would have been foolhardiness. Division of the cricoid cartilage and first ring of the trachea and so much of the mass lying below as was necessary to get the canula into the trachea, was at once determined upon. This would rescue the patient, at least from immediate danger of suffocation, afford

•
Nearly died by
drowning with
blood.

Never attended
himself at all,
and was always
troubled about
swallowing.

him a chance to recuperate his strength, and perhaps admit, at some future time, of a supplementary operation. *No untoward event happened when the incision was made and the canula introduced. When the effect of the anæsthetic had passed away, the patient, though much exhausted, breathed easier, and fell into a slumber. When I visited him in the evening he was a changed man.*

The next day, August 17, he exhibited some symptoms of pneumonia, which yielded, however, to treatment in twenty-four hours. Mucus and blood were discharged from the canula, but the wound caused little or no pain. The process of eating and drinking, at first a little difficult, soon became perfectly easy. On the fifth day the stitches were removed. There

was some soreness and discharge around the canula. The greater force of the left larger division of the tumor twisted the canula somewhat toward the right. On the sixth day the patient sat up, and could attend himself to the cleaning of the tube, eat with comfort, and move about. A laryngoscopic examination showed the growth distinctly, grayish-red in color, nearly closing the glottis. He spoke, of course, only in a whisper; could not articulate the first word, or make other than a hissing sound.

The progress now made from day to day was surprising. He lost that anxious look, relished his food, and slept well. He could breathe easier and take a deeper breath than he had done for years. August 25, being obliged to visit a patient in Montreal, I saw Captain Bigelow for the last time. He also made preparations to return home the next day. Before leaving, he called upon Dr. Sayre, who cauterized the wound, as it had become irritable.

From a letter received from this patient, dated September 9, 1869, I made the following extracts: "I endured the journey from New York to this place remarkably well, but was considerably fatigued and troubled with the dust; have been gaining ever since I came here. Have walked and rode, and am becoming expert in the arts of eating and drinking, both of which I do now without putting my finger on the tube or otherwise closing it. The wound in the throat is healing full as well as could be expected."

Nothing has been elicited from the captain since the above date, till a short time since I came in possession of the following statement of his case, brought down to the date of writing:

My letter to Dr. Sayre.

"When I first got home, I improved in strength and general health very rapidly for eight or ten days—but continued to cough a good deal—raising much mucus, varying from clear white to yellow, often streaked with blood—frequently a good deal of blood, as I had ever since the operation. Scabs formed below the tube, which I would several times each day cough up with more or less difficulty, and this has continued to the present time. At first, had four or five of them each twenty-four hours—raising them always with severe coughing and more or less blood, in quantities from two tablespoonfuls down to occasionally a very minute quantity. The scabs sometimes are so large and hard, and get stuck so fast, that, even with *small* tube removed, I have been many times nearly strangled. Lately, however, they have been much reduced in size, more irregular, and healthy in appearance.

"For two or three weeks my cough, though very frequent through the day, was much worse at night; and as I could not cough alone, I was compelled to have my wife up to assist me, sometimes twenty times per night. As this was wearing us both out, I began to take, on going to bed, twenty to twenty-five drops McMunn's Elixir, and this opiate immediately gave me quiet sleep and rest free from coughing. To relieve my cough and pains, and give me quiet sleep, I have continued this to the present time.

I have had considerable bronchitis, and had one bad cold—just now I have no cold, and less bronchitis. Still I cough up a good deal of mucus and blood. Some of this blood we know must come from the trachea *below* the tube. Some of it we also know comes from the tumor *above* the tube—as, when it has a bleeding-turn, we can see it dripping in through the hole in upper part of the tube. When I left New York, as you saw, suppuration was going on inside and oozing out around the tube—this continued and increased, so it was difficult to keep my throat tolerably clean until middle of September, when it ceased. While active it had much odor, as also had my mouth, *when held open*, though kept as clean as possible. We had great hopes that this suppuration would work a favorable change, but it stopped almost in a day. The tumor had previously somewhat enlarged, but now it grew faster in size, and got very hard, all around the tube, especially above and on left side. I had a good deal of soreness around the tube—and as this hardness and swelling increased, so also did the pain. My left ear began to ache severely and almost constantly, as before the operation.

“Immediately around the tube, a *ridge* or swelling formed, harder than any other part. During all this time *proud flesh* had never ceased to grow, since the first that you cauterized in your office. We had continued to cauterize it—but as fast as it was killed in one place it appeared in another; this fungus gradually changed in appearance, cauterizing became painful—burning, smarting pains lasted often for hours after the application—the pains of each thorough dressing and cleaning of my throat morning and evening were exquisite. Still this fungus was pronounced ‘proud flesh’ and cauterized. At last Dr. Martin (our family physician, whom you may remember as present at the operation) applied a paste, which he thought would have different and better effect than caustic—but two applications were made, as the swelling around the tube increased—the *ridge* above named was forced up into quite a *hillock*, through which the tube appeared, and was forced far away to the right side of its original position. During these painful days and weeks, the changes from day to day were remarkable. At last this ‘*RIDGE*,’ from an angry red, grew purple, then black, and at one morning’s dressing my wife *removed the whole of it* without difficulty—a *dead, rotten mass of decayed flesh*—and it left a *trench* around the tube, about three-eighths of an inch wide and deep, and not a bit of proud flesh was to be seen; but on the left side, close against the tube, was a *dark, rough, warty growth*, as large as a full-sized pea, and larger—looking ugly enough. It had no attachment to the flesh beside it, as it and the flesh could be pressed apart easily. While the flesh adjacent was exquisitely sensitive to the touch, this ‘growth’ had no sensitiveness at all, but could be pressed with the point of a knife, without any feeling, though it was easily provoked to bleeding. There can be no doubt but what this is a part of the original tumor which has forced itself out of the windpipe and through to the surface, beside the tube. From that time till a week since (about eleven days) my wife used morning and evening to take away

portions of this matter, which would 'slough' off the tumor. As this diminished, suppuration began again; the swelling all around the tube—or rather *the great tumor* in the trachea—which was so large and swollen and hard before, became greatly reduced, and, when the 'sloughing off' ceased, suppuration became more active, with very offensive odor; this has gradually decreased, till now the suppuration is but slight, and the 'trench' around the tube, that for a time was a ghastly sight, is now nearly healed up; but next the tube the tumor has extended, and at present it can be seen *two-thirds the way around the tube*, and the original tumor inside the trachea has so enlarged and expanded it, that it appears now more than twice as large as at the time of operation, and is almost as hard as a stone. Coughing and bleeding continue as before, much blood comes from the tumor, and considerable comes from the lower trachea, if not from the bronchial passages. I cannot believe that the tumor has extended below the tube yet—but certainly there is more difficulty in breathing, that is, even when free from scabs and mucus. I do not inflate my lungs as freely or as easily as I did five or six weeks ago, and breathing generally is not as easy.

"This may be owing to irritation and inflammation about the inner end of the tube, making the passage smaller, or it may be the growth of the tumor, encroaching on the passage into the tube—or something else beyond my ken may occasion it; I cannot and dare not even guess what it is! During the time the above-named 'ridge' was forming, and even until the subsequent 'trench' was nearly healed, I had almost continually sharp, stinging, darting pains around the tube—not extending far from the tube, but all radiating from that as a centre—sometimes the hole in which the tube is inserted would feel as if filled with a red-hot iron or live coal, so intense would be the pain; at other times the pain was less, and more as if it was filled with a *chestnut-bur*; at other times the stinging, burning, darting pains would follow each other in quick succession, appearing to me, especially when asleep, like so many irregular shots fired from one centre, but mostly to the left side—all this time the pain was most exquisite while the throat was being cleaned and dressed, and, soon after the first application of warm water with a soft camel's-hair brush, it would invariably become so severe that I could scarcely endure it.

"This has lately gradually diminished, till now I have none of the pains mentioned, and but little tenderness about the parts when under cleansing treatment, and I should here say that, through the most painful period mentioned, there were intervals of comparative comfort and relief, but they were short and irregular. The tendency to left earache has been almost constant for nearly a month past—much of the time it is dull, and not very hard; but it has paroxysms of very severe aching pain in left ear—doubtless caused by inflammation and enlargement of the throat, affecting the nerve in some way that you understand, but I do not. When the earache comes on quick and sharp, it has frequently, within the last ten or twelve days, been accompanied with aching of all the teeth on left upper jaw—but

this has never lasted more than fifteen or twenty minutes at a time. Respiration, as I have said, is not as free as it was a few weeks since. I have to be careful to avoid the cold air, as it goes so directly to my lungs that the effect is bad; when the weather is warm I walk or ride out, but at other times I keep the house pretty closely, with rooms kept warm with wood-fires, and fresh water steaming to moisten the atmosphere. I do not feel as strong, nor can I endure the exertion I could a few weeks ago, and my appetite, which was then strong and hearty, is now poor and variable.

The above account needs no comment. The rapid progress of the growth foretells also the sequel.

Résumé.—For six years the patient was suffering and constantly getting worse, yet his true condition remained untold until he was subjected by myself to a laryngoscopic examination. This much the captain used to grant, that for the first time he had been told what ailed him: and I think also my diagnosis and prognosis were correct. What might have been the result, had the disease been discovered in its incipient stage and treated accordingly, cannot now be told. It may, however, be asserted, that if the disease, as subsequent results have shown, was malignant, it would not have been arrested or eradicated. Still, could not its progress have been retarded, and thereby the patient's life prolonged?

Again, local interference through the mouth accomplished all that reasonably can be claimed for it in a case of this nature. It gave the patient comfort—it helped to prolong his life.

The operation of the tracheo-laryngotomy, had it been performed earlier, to which Captain B., however, most strenuously objected, as well as his friends, might have resulted in great good. Undertaken, as it was, at the very latest moment, under conditions of great danger, it still was a success, and accomplished all we had a right to expect.

As to the doctor's statements of the thanks, gratitude, and confidence of the captain in him, I refer simply to the widow's letters, and the marked copy of the doctor's report in the captain's own handwriting. I would draw especial attention to another sentence in the doctor's reply, in which he confesses that he had written the report with the intention of conveying

the idea that *he* performed the operation, but, when carefully read, could only be interpreted that *I* could have done it, but that he did not punctuate his sentences too correctly, so as to parse grammatically that “I” instead of “himself” had performed the operation; and in the very next sentence he states: “Upon reading, however, that rather, I should think, complimentary than disparaging sentence, your injured sense of justice is aroused, you swear vengeance, and, *presto*, you addressed questions in writing to the gentlemen who were *my* guests, not *yours*, at the operation,” thereby inferring that it was his operation, and certainly contradicting his previous expression that it was *my* operation. I leave it to the doctor to explain this discrepancy.

The doctor now states that he wished to make the *amende honorable*, and wrote me the following note:

FIFTH AVENUE HOTEL, }
NEW YORK, *December* 31, 1869, 11 A. M. }

MY DEAR DOCTOR:

I regret to learn, from a mutual friend of ours, that you feel yourself aggrieved, inasmuch as that I had not done you justice in my report of Captain Bigelow's case.

Allow me here, therefore, to state that, when I wrote the report of my case, I had not the *remotest intention* to claim for myself what credit, in my case, really belongs to you. I trust you have known me long enough to know that I am not willing to compromise the good opinion and fame of a professional friend in a few printed lines. I disavow any sinister motives *in toto*.

If there is any doubt as to who performed the operation, I shall be happy to clear up that doubt in a supplementary note to the JOURNAL, as well as in reference to the hæmorrhage, which fact, I acknowledge, I overlooked in my report.

I am not willing that the dear old year should pass away, and the new one come in, without my addressing you, in the sincere hope of a satisfactory solution of the difference.

With the compliments of the season, I remain very truly yours,

A. RUPPNER, M. D.

Dr. L. A. Sayre, Fifth Avenue.

“This letter,” he states, “written in a most kindly spirit, for an honest purpose, you never condescended to answer,” and finds great fault because I have not quoted the whole letter in

my first report, but only sentences of it. In looking over my manuscript, I find that asterisks are placed at the proper positions showing the parts of the letter left out, but which were neglected to be inserted by the printer; but compare the two letters as quoted, and you will find that they are perfectly correct so far as quoted.

The doctor finds fault that I have not replied to his letter. No gentleman could reply to a letter from one who confessed that he had published a falsehood until he had as publicly corrected his error as he had publicly committed it. His letter to me individually, containing the statement that he had no *sinister motives*, was of no moment. His statement had been made to the public, and it was to the public, through the same source that he had propagated the falsehood, that he should have made the correction, and not to me individually; and the fact of answering his letter at all until this correction had been made, would have been an admission that *I* considered him a gentleman, which, as a *publisher of falsehoods*, of course *was impossible*. As to the fifty operations of a similar sort in which Dr. Zolnowski assisted during the space of a year and a half, I have nothing to state, except that in my opinion it is a much larger number of cases than even Dr. Ruppaner, who makes a specialty of diseases of the throat, has performed in the same space of time.

The fact is, that Dr. Ruppaner never intended to correct his error in the MEDICAL JOURNAL, as is apparent from the following letter from Dr. Reuben A. Vance. And it shows, also, the *animus* of the doctor, and that he had been dwelling on this subject for nearly two years—without ever speaking to me about it—on the contrary, all this time pretending to be my greatest friend. The doctor being near my office, and very convenient of access, I had called at his office on two separate occasions, when suffering from a slight laryngitis, and he applied a solution of iodine to my throat very satisfactorily, and I felt grateful to him for his attention; sent him quite a number of patients; was instrumental in helping him to get up a dispensary for the treatment of throat-diseases, and my name is published as one of the incorporators and trustees of this institution.

So far, therefore, as the influence of my name may go, I am responsible to the community for indorsing and recommending him to public patronage. This was done at a time when I had confidence both in his capacity and integrity.

But discovering his deficiency in both of these *essential* qualifications, and that he had hired a building, opened the institution, obtained money from the city and private individuals for its support, and publicly advertised its existence by distributing circulars announcing himself as physician, along with the names of the other medical officers of the institution, *without any knowledge or consent of the Board of Trustees—in fact, the Trustees had never been called together at this time, and there was no organization of the Board of Trustees for some weeks after this public advertisement of the opening of the institution*, of which he was the *self-appointed* physician—and as the Board of Trustees were the only legally authorized persons to make appointments, or direct the management of the institution, I looked upon this action of Dr. Ruppaner as a fraud, and, to absolve myself from any responsibility in the deception, narrated these facts in my first review of his case. But the editor of the MEDICAL JOURNAL advised its erasure, as it was irrelevant and personal matter.

I therefore here repeat these facts, in order to absolve myself before the community from any responsibility for his present official position in the New York Dispensary for the Treatment of Diseases of the Throat.

A few days after I had operated upon Captain Bigelow, I met Dr. Ruppaner in front of the Fifth Avenue Hotel, and he then told me that the “Boston doctors were opposed to the operation,” and said they had told Captain Bigelow “those New York doctors would cut his throat and kill him . . . In fact I thought he would die myself, *but I thought he had better die on your hands than on mine.*” This remark was made with a strange, sardonic laugh, and so surprised me that I scarcely knew what to reply to it, as I could hardly understand its meaning. Viewed, however, in the light which is thrown upon Dr. Ruppaner’s feelings toward me by Dr. Vance’s letter, this remark has a very significant meaning indeed.

144 EAST TWENTY-SECOND STREET, }
 NEW YORK CITY, *June 1, 1870.* }

DR. LEWIS A. SAYRE, 285 FIFTH AVENUE—

DEAR SIR: In reply to yours of May 27th, I have to state that, early in January of the present year, Dr. Ruppner called at this office to see me in regard to the case of Captain Bigelow, I having been present at the operation performed upon that gentleman in August, 1869. During the course of the conversation, I urged Dr. Ruppner to correct the phraseology of his report published in the *NEW YORK MEDICAL JOURNAL* of January, 1870, so that there could be no misapprehension as to who performed the operation, and thus obviate the threatened difficulty. This he declined to do, saying that, as you had injured him, on a prior occasion, you would not dare to have any trouble with him about the present case, as you knew it was in his power to expose what he designated as your falsehoods about the poisoning cases at the Fifth Avenue Hotel.

There was nothing in our interview that partook of the nature of a private conversation, Dr. Ruppner expressly disclaiming any such interpretation of his communication.

Yours truly,

REUBEN A. VANCE.

I will now leave the case of Captain Bigelow, and refer to the particular charges which I have to make against Dr. Ruppner for unprofessional conduct in his reference to what he styles "The great poisoning case, by partridges, at the Fifth Avenue Hotel," which occurred on the 15th of February, 1868.

In reply to this I would state, and as will be seen by Mr. Suit's, Grimes's, Guthrie's, Willmarth's, and other letters, that for many years I had been Mr. Suit's family physician; that a messenger came to me on the evening in question at about six o'clock, just as I was sitting down to dinner, requesting me to see Mr. Suit *immediately*; that on going to the door to ascertain whether it was a case that required immediate attention or could be postponed until after my dinner, the messenger informed me that "Mr. Suit and his friend had been on a lark and were at the hotel pretty drunk," when I replied, "That being the case, he could wait until I had got my dinner," and told him I would be down as soon after dinner as possible. In a very few minutes after, another messenger, Thomas Wiseman, arrived, requesting me to go in haste (whose letter stating the facts will be found attached to this report). He also stated that Mr. Suit was pretty drunk, and that I had better come as soon as possible. I immediately went with

this messenger to the hotel, and found Mr. Suit and his friend both there sick, and two or three gentlemen in the room. Upon asking Mr. Suit what was the matter, he stated that he did not know; when I asked him how long he had been sick, he stated "Only a few minutes; a little while ago, coming through the reading-room, my legs all went to pieces, and some fellow there reading a paper said it was a pity to see such a handsome fellow as I was set up that way; I replied to him, I thought I was pretty well set down." This remark giving no evidence of drunkenness, caused me to smile, and after asking him a few more questions I said to him, "I do not think you are drunk, Suit;" he replied that he did not think he was himself. Upon asking him to get up and let me see what was the matter, he said he could not, and upon his making the effort apparently fainted and fell backward, and I sent to the bar-room and got some brandy to restore him. The bar-keeper remembers very well having sent it in a very few minutes after my arrival, and will testify to that fact. Finding that his pupils were immensely dilated, his pulse very weak and feeble, and when in the erect posture almost ceased, and yet his intellect was clear, I stated to Mr. Suit that he did not seem to be drunk at all, but acted as if he had been poisoned; he replied that it must be the whiskey, that he knew what whiskey was made of, and, thinking that he was correct, I replied to him that I guessed he was right; some gentleman present, whose name I do not now remember,¹ stated that I must be mistaken about the whiskey, that he had drunk as much as either Suit or Grimes, and wanted to know if I thought he was drunk or poisoned; I told him, no; he seemed to be all right, and asked him what was the real truth about the whole story; what had they eaten and drunk, and to let me know what had passed the whole day. He stated that they returned in the New Haven cars from Canada too late for lunch and too early for dinner, and had gone to the St. James's Hotel to get dinner; he had eaten of something which I have now forgotten, but that the other two men made their dinner of partridges; and Suit stated that he had eaten twice of the par-

¹ I have since learned that the gentleman referred to was Mr. Frank Turk, of Washington City, whose letter will be found annexed.

tridges, and the balance that was left Grimes finished, and when they came to *dessert* Mr. Grimes complained of feeling very faint, that he never felt so faint in all his life, and felt as if he wanted a drink of brandy; Mr. Suit remarked that he felt exactly the same way, and would like to take a drink too; the other gentleman who was telling me the story began to laugh, and said it was rather novel for two fellows to eat themselves faint; that it was the first time that he had ever seen such a thing in his life; that upon getting up to get a drink, or else ordering it, I have forgotten precisely which, they got so much worse that they hurried to the front door and got into a carriage which stood in front of the hotel, and drove immediately to the Fifth Avenue Hotel on the Twenty-third-Street side. In getting into the carriage Mr. Grimes fell down and vomited very freely. Upon arriving at the hotel they mustered up all their courage and strength, and succeeded in walking as far as the reading-room, where they both fell down almost at the same time and in a similar way, and were carried into the room. I was then sent for *immediately*, as will be seen by referring to Mr. Hasimer's letter, the clerk in the bookstore, who assisted in carrying Mr. Suit into the room, and also to Mr. Suit's and Mr. Turk's letters.

Viewing the case with the evidences before me: three men having drunk of the same wines and whiskey, in nearly equal quantities, but eating of different food, and the two men who had eaten of the partridges being very sick, and the one who had eaten the most partridge being the sickest of the two, but the same kind of sickness, I naturally inferred that the sickness by poison was due to the partridge which they had eaten, and so stated to them. Mr. Turk replied that he thought I was correct—as the birds could get nothing to eat in deep snow, except from the laurel-berries, which were poisonous. Mr. Grimes was very much exhausted and very faint, and had vomited very freely, and was still vomiting. Mr. Suit not having vomited so freely, and still complaining of sickness at his stomach, I caused him to drink large quantities of water for the purpose of distending his stomach, and by mechanical distention excite muscular contraction, and so cleanse him from whatever it contained.

After having done this, still finding him with a feeble pulse, and dilated pupils, I feared that whatever poison he had taken had been absorbed into the system, and I so stated to him, and that I would go into the drug-store and ascertain what was the proper remedy to give him, which I did; and stating, in Messrs. Caswell & Mack's drug-store, that the two gentlemen were poisoned from the eating of the partridges, some person in the store said it was the poison of the laurel-berry; that the birds were compelled to feed on them on account of the depth of the snow; and when I asked him what was the antidote he stated he did not know, and requested one of the clerks to get out the book, either Christison on Poisons, or Wood and Bache's Dispensatory; and we were reading over this book in order to ascertain the proper remedy to be administered, when Dr. Ruppaner came into the drug-store, which I think was the first time I had ever seen him; he introduced himself to me as Dr. Ruppaner, and informed me that he had seen two of my patients that evening who were "very sick, very sick indeed, in fact they were pretty tight, doctor." I told him I did not think they were drunk, I thought they were poisoned from eating partridges, and I was trying to hunt up a remedy for them; he said they were poisoned with the bad whiskey we had in this country, "Pretty bad whiskey, doctor." I again informed him I thought they were poisoned from eating the partridges, and the gentleman who was hunting over for the remedy which he wanted had succeeded in finding it, and he hastily prepared it and put it up for me, which I took to their room, not having written any prescription for it.

I requested Dr. Ruppaner to come back to the room with me and see them; he refused, stating that he merely lived in the hotel, that he was very glad to have been able to do any thing for me, very happy to do any thing of the kind, but they were my patients, and he declined to do any thing further. I asked him to go in as matter of curiosity, as it was a very interesting case, which he did, and after having given them the medicine, which they continued to take for a couple of days afterward, I requested him, as he lived in the hotel, to come in and see them frequently, as I had to go home to my

dinner and attend to my office business ; that I would be back again at ten o'clock and see them again with him, which I did. So far as the statement made in the *Sunday News*, I never knew any thing of it until I read it in Dr. Rupper's report. I have since ascertained that it was written by a gentleman of the name of Pittman, whose letter, which is hereto annexed, will explain fully that I knew nothing at all about it. I received from Mr. Roosevelt, the gentleman who has published a book on the birds and fishes of the State of New York, a very respectful communication, asking for information in regard to the case, which I replied to, and which is copied in Dr. Rupper's report precisely as I wrote it, but, as will be seen by his letter hereto annexed, was not written for the purpose of publication, although I think it our duty to thus disseminate useful information to the people, to protect them against an unsuspected danger.

COLEMAN HOUSE, NEW YORK, *April 28, 1870.*

TO DR. LEWIS A. SAYRE—

DEAR SIR: My attention has been called to a pamphlet, purporting to have been written by one A. Rupper, M. D., in which he published an article written by me on the well-known partridge-poisoning case that occurred at the Fifth Avenue Hotel, February, 1868, and which appeared in the columns of the *Sunday News*, on the 1st of March, 1868. In commenting on this article, Rupper intimates that it was written and published with your knowledge and consent.

In justice to you I beg to say, most emphatically, that it was not written or published with your knowledge or consent ; and I do not know that you ever saw it in the *News*. I am certain I neither directed your attention to it, nor sent you a copy of the paper. I heard of the case the night it occurred, and having met Mr. Suit some time previous, in company with Hon. Benjamin Wood, I took an interest in the matter, and ascertained the facts from authentic sources, and so published them, believing the public to be as much interested in such a case as the medical fraternity.

Had Dr. Rupper taken some pains to have ascertained my knowledge about the "great master of surgery and wonderful decoction that mysteriously kills poison," he would have been spared the labor of his unjust comments, and his ungenerous attack on your professional reputation.

With great respect, yours truly,

THOMAS W. PITTMAN.

NEW YORK COMMISSIONERS OF FISHERIES:

HORATIO SEYMOUR, Utica,

GEORGE G. COOPER, Rochester,

ROBERT B. ROOSEVELT, New York,

32 Beekman Street.

DR. LEWIS A. SAYRE—

MY DEAR SIR: I regret to hear that any complaint has been made against you, concerning the publication of a letter which you wrote to me some years ago in reference to the danger of eating partridges (ruffed grouse) out of season.

I had written several works on sporting matters, and had mentioned the fact that the flesh of these birds occasionally became poisonous in consequence of their feeding on laurel-berries.

This assertion of mine had been disputed, when the effect of the game laws was under discussion, and I, hearing that you had a case in point, wrote to you, asking you for an account of it. You kindly sent me the answer, which I, without thinking it could possibly be misconstrued, published, the matter being one of serious public concern, and about which there seemed to be some doubt.

The first time I saw you after such publication, you complained to me of what I had done, and said that you had not intended your letter for use in the paper, but merely meant it for my own information.

I was quite surprised at this, as I knew of no professional rule on the subject requiring a matter of such vital importance to the public to be kept secret. I hope that the medical fraternity do not desire to keep the people in ignorance of danger, that they may have the pleasure of curing them, after they shall have unwittingly poisoned themselves.

In any event, if there is any one to blame, it is myself, through my unintentional error.

In justice to you, I will be happy to substantiate this statement in any manner that you may desire.

Yours, very respectfully,

(Signed)

ROBERT B. ROOSEVELT.

Let us now compare the statement of this poisoning case, as published by Dr. Ruppaner, and the facts as testified to by a number of credible witnesses.

Dr. Ruppaner, in his pamphlet, says, "February 15, 1868, *between four and five o'clock* (the italics are mine), I was hastily summoned from my office to room II, on the same floor of the hotel as my own, where I found two gentlemen, lying each on a bed, surrounded by a few gentlemen, friends of the patients—one the father-in-law of one of the sufferers," etc. This latter gentleman referred to is Mr. Willmarth, the father-in-law of Mr. Suit. By referring to the annexed letter of

Charles Ledworth, the usher at the dining-room of the Fifth Avenue Hotel, it will be seen that Mr. Willmarth was at dinner at the time Mr. Suit was brought into room II, and it must therefore have been *after* half-past five o'clock, as the room is not opened until that hour. It is highly probable that it was nearer six, as the regular boarders of an hotel are not apt to rush into the dining-room the moment the doors are opened.

FIFTH AVENUE HOTEL, *May 2, 1870.*

A little after six o'clock, on Saturday, February 15, 1866, one of the hall-boys came after me and wished me to call Mr. Willmarth out from the dinner-table, stating that his son-in-law, Mr. Suit, was down-stairs very sick, and wanted him to come at once.

I always open the dinner-door at five and a half o'clock.

CHARLES LEDWORTH, Usher.

The doctor made a hurried examination of the patients, and says:

“Satisfied that no time was to be lost—my diagnosis being poisoning by *hydrocyanic acid*—I ordered the by-standers to apply friction, with speed and force, so as to keep up the circulation, and to produce warmth. Ordered hot fomentations to the bowels; sent a servant for mustard and warm water, and, in the mean while, rushed to Caswell & Mack’s drug-store, where, not having time to prescribe, I had handed to me, with the utmost dispatch, some muriate of ammonia and sesquichloride of iron, rushed back, prepared and administered the antidote in the presence of the by-standers. Immediately after, I prepared myself the emetic of mustard and warm water, administered it in large quantities, got powerful action therefrom soon; kept this action well up by additional doses of the same emetic. Later I gave an active purgative, which acted promptly and powerfully, and thus, after some *three hours* (the italics are mine) of hard, very hard work—thanks to the kind and humane assistance of the friends present—I had, under Providence, the great satisfaction to see my two patients out of danger. These were indeed *three hours* of intense suspense, of the result of which any medical man might justly feel proud.”

By referring to the letters of Mr. Suit, Henderson, Turk,

and Hasimer, it will be seen that I was sent for *immediately* after Mr. Suit was carried into room II, and, by referring to the letter of Wm. Henderson, it will be seen that *he* took the recipe from Dr. Ruppaner and got the medicine from the drug-store, and took it back to him.

FIFTH AVENUE HOTEL, *April 9, 1870.*

Dr. LEWIS A. SAYRE—

DEAR SIR: I am the clerk of the book-stand in the reading-room of the Fifth Avenue Hotel, and saw Mr. Suit and his friend fall down in the room some two years ago, at the time they were poisoned.

The evening papers were just coming in at the time, about half-past five or six o'clock, when two gentlemen fell very suddenly on the floor in front of the book-stand.

I ran out and helped one of the gentlemen to room II, back of the bar-room.

Dr. Ruppaner was immediately called to see them, but Mr. Suit said, "I want Dr. Sayre; he is my doctor." Dr. Ruppaner replied: "Oh, I will fix you all right in a little while; you are in no danger—a little tight, my boy, a little tight; but, if you want Dr. Sayre, you had better send for him;" and a messenger was immediately sent for you. JOHN B. HASIMER.

NEW YORK, *April 29, 1870.*

Dr. L. A. SAYRE—

DEAR SIR: I have read the pamphlet of Dr. Ruppaner's, and particularly that part relating to Messrs. Suit and Grimes's case of poisoning at the St. James's Hotel about two years ago.

I was employed at the Fifth Avenue Hotel at that time, and was in attendance on the sick men from the time they were brought to the house until they recovered. Dr. Ruppaner was in attendance on the men immediately after they were taken ill, and I heard him say they were suffering from the effects of drink.

A messenger was sent for you, and, as you did not come immediately, Mr. Suit sent me to hurry you up; you came, I think, about six o'clock in the evening, and, after some conversation with the sick men, you said they were not drunk, but poisoned. Mr. Suit said: "It must be that bad whiskey, I know what whiskey is made of," and you said you guessed he was right. Some other gentleman¹ standing by said: "Doctor, it cannot be the whiskey, as I drank as much as they did, and I am not drunk." You said he was all right, and asked him all they had to eat and drink that day. He said they had dined at St. James's Hotel, and that the sick men had eaten partridge, the sickest man having eaten the largest quantity.

¹ Turk, lawyer in Washington.

You made one of them drink a large quantity of water, and vomit, and went to the drug-store and returned in company with Dr. Ruppaner:

You were with the sick men some time later that night.

I was almost continually in the room with the sick men, and do not believe they got any medicine until you came, and I am sure Dr. Ruppaner said drink caused their sickness. On that night, and on several occasions afterward, both Mr. Suit and Mr. Grimes told me they thought Dr. Ruppaner knew very little about their case.

Yours, very respectfully,

THOMAS WISEMAN, 448 Fourth Avenue.

150 WEST 28TH STREET, April 27, 1870.

I was hall-boy at the Fifth Avenue Hotel in 1868, at the time Mr. Suit and Mr. Grimes were poisoned, and was called on to answer the bell of room letter H, as near as I can recollect about 6 o'clock or between 6 and 7 o'clock. When I got there, Dr. Ruppaner wanted me to go to the apothecary store for some medicine.

He gave me a paper, which I took to the drug-store of Caswell & Mack, and they gave me a bottle, which I took back to the room and gave to Dr. Ruppaner.

WM. HENDERSON.

The doctor's treatment, as above described by himself, is certainly most remarkable. He says that he "prepared and administered the *antidote* in the presence of the by-standers. *Immediately* (the italics are mine) after I prepared, myself, the emetic of mustard and warm water, administered it in large quantities, got powerful action therefrom soon; kept this action well up by additional doses of the same emetic."

The poison had already been absorbed into the system; and what good could be expected from an antidote, if it was vomited out of the stomach *immediately* after it had been put in, I am unable to see. Comment on this part of the doctor's treatment seems to me unnecessary.

"After over three hours of friction, vomiting, purging, taking of antidotes, hot applications, and any amount of anxiety all around, the patients were quite comfortable, warm, pulse lower and fuller, and an inclination on their part to converse, manifest."

"At this stage of the case, Mr. S. said to me: 'Doctor, what ails me, anyhow?' 'You were poisoned, by eating those partridges,' I replied. 'Oh, no; I know it was that vile whis-

key we were drinking that did the work,' rejoined Mr. S. 'Sorry for your whiskey, then,' was my reply.

"Mr. S., still continuing to doubt, asked me: 'Do you know Dr. Sayre?' I replied affirmatively. 'Have you any objection to my sending for him, to see whether he thinks as you do, for he has attended me before when I was sick?' 'Not at all,' was my answer; 'I shall be glad to have Dr. Sayre see you.'

"A messenger was immediately dispatched. During his absence, I was called to see another patient up-stairs. When I returned to the room where my patients were, I was told that you (Dr. Sayre) had been there, and gone into the apothecary-store. Following you there, I met you."

"*All of my prescriptions can be found entered at Caswell's, in their books, corresponding to the dates, number of room, and patients in question.* But I have taken the trouble carefully to look for your prescriptions, particularly the antidote, but there is not one of yours to be found in the prescription-book of that period! Very singular, indeed! Perhaps you sent out for the medicines, as more handy than to get them right in the house! Is this, too, a question of veracity between you and me?"

This certainly is a question of veracity between us, and by referring to the letter of Mr. Willmarth, and the certificate of Drs. Jordan, Newman, Katzenbach, and Storer, it will at once be seen who is entitled to belief. I request especial attention to the postscript of Mr. Willmarth's letter:

NEW YORK, *April* 13, 1870.

DEAR SIR: We have carefully examined the prescription-books of Caswell & Mack, for the date of February 15, 1868, and find two prescriptions of Dr. Ruppener's on that day. The copies are herewith enclosed, *but we do not find any prescription, or the trace of one, containing iron and ammonia.*

Respectfully, etc.,

W. C. JORDAN, M. D., 304 Madison Avenue,
W. H. KATZENBACH, Esq., 225 East Thirty-first Street,
ROBERT NEWMAN, M. D., 107 West Forty-fifth Street,
HORATIO R. STORER, M. D., Boston, May 1, 1870.

TO DR. L. A. SAYRE, Thirtieth Street and Fifth Avenue.

R. Bismuth subnit. ʒj,
 Infus. gent. co. ʒ iss,
 Aq. menth. pip. ʒ ss.

℥. S. A teaspoonful every half hour till relieved.—RUPPNER.

R. Pil triplex, No. xii,
 Two pills night and morning.

R. Sodæ bicarb., ʒ ij.—RUPPNER.

HOME INSURANCE COMPANY, }
 Office, 135 Broadway. }
 NEW YORK, *April 25, 1870.*

DR. LEWIS A. SAYRE—

DEAR SIR: In response to certain inquiries in your note of the 16th inst., I will say:

1. That when you were called to Mr. Suit at the time he was poisoned, at the Fifth Avenue Hotel, while I should hardly feel willing to testify that Dr. Ruppner was not in the room at the time of your arrival, I think he was not. Indeed, I am quite positive that he was not.

2. I remember distinctly that you made, or rather continued, Mr. Suit's vomiting by administering very large quantities of warm water after your arrival; and—

3. Please bear in mind that I do not retract nor amend the statement made to Dr. Ruppner, that in my opinion the lives of both Mr. Suit and Mr. Grimes were saved by him prior to your arrival, and while I knew that he had prescribed for them I did not so inform you (at least I have no recollection of doing so), neither did I know of what the prescription consisted.

Very truly yours, etc.,

A. F. WILLMARTH.

P. S.—It is proper for me to add that Dr. Ruppner informed me a few weeks since that the prescription referred to might be found on the books of Caswell, Mack & Co., giving number of room, etc., and that to my knowledge you had previously been Mr. Suit's family physician. A. F. W.

WASHINGTON, D. C., *May 4, 1870.*

DR. L. A. SAYRE—

DEAR SIR: In answer to your verbal request as to my knowledge of a case of poisoning which occurred at the Fifth Avenue Hotel, New York City, on the 15th of February, 1868, I have to say that Mr. S. T. Suit and Mr. Grimes, with myself, on that day, took lunch together at the St. James's Hotel, those gentlemen partaking of a partridge, of which they ate heartily, and soon after complained of feeling unwell. I advised their taking a drink of whiskey, which was the only liquor they took during the day. I soon after left them, and went to the reading-room of the Fifth Avenue Hotel, where they soon after made their appearance seriously ill and complaining that they had been poisoned; they were carried to a room

on the same floor, and, learning that a Dr. Ruppaner had an office in the house, I called him in to render such aid as they might require. Mr. Suit was desirous that Dr. Sayre should be called in, and I dispatched one or more messengers for him; until his arrival, Dr. Ruppaner devoted himself to the care of both gentlemen. Dr. Sayre arrived about one hour after they were taken. Dr. Ruppaner having just then left the room, the impression seemed prevalent that the gentlemen were under the influence of liquor; but I informed Dr. Sayre, as I had already done Dr. Ruppaner, that they had evidently been poisoned by eating the partridge. I think Dr. Sayre immediately recognized the fact, and treated them accordingly—administering various remedies and large quantities of water. I should fix the hour $4\frac{1}{2}$ to 5 o'clock, and that of Dr. Sayre's arrival from $5\frac{1}{2}$ to 6 P. M.

Mr. Suit was unwilling to believe that he had been poisoned by eating the bird, but insisted that it was the drink of whiskey he had taken, intimating that there might be parties interested in getting rid of him, and if I knew as much about the way whiskey was made as he did, I would know it was that that caused the trouble.

Truly yours,
FRANK TURK.

GRAND HOTEL, *May 25, 1870.*

DR. LEWIS A. SAYRE—

DEAR SIR: In answer to your note of April 16th, I will state that I am positive that, when you were called in to see Messrs. Suit and Grimes, at the Fifth Avenue Hotel, at the time they were poisoned, Dr. Ruppaner was not in the room at the time of your arrival, nor did I hear any one inform you that he had been there.

You did administer large quantities of warm water to Mr. Suit, which caused him to vomit very freely. I wish to state further, that I find from Dr. Ruppaner's pamphlet that I used the term antidote in my note to him. Not being a medical man, I am, of course, not competent to judge whether his prescription was an antidote to the poison or not, and should, therefore, have used the word remedy instead of antidote.

Very respectfully, your friend,
L. T. GUTHRIE.

SILVER HILL, *May 2, 1870:*

DR. LEWIS A. SAYRE—

DEAR SIR: In reply to your note of the 16th of April, I distinctly remember of Mr. S. T. Suit ordering some one to send for you immediately after we were carried in room II, in the Fifth Avenue Hotel. I also remember of him having sent a second time, seeming very anxious to see you, said you had been his physician before. Prior to your arrival, Dr. Ruppaner had been in to see us. I do not remember that he, Dr. Ruppaner, told me, before I saw you, that we had been poisoned by eating partridge or any thing else.

I remember of taking some brandy, with something else in the shape of medicine, ordered by Dr. Ruppaner. On your arrival I do not remember of Dr. Ruppaner being in the room at the time. I remember of you saying, as I had vomited freely, I needed no emetic at the time, but you went directly to work on Mr. Suit with cold water. I think he must have drunk four or five pitchers of water, and threw it up as fast as his stomach would fill; you said, if there was any portion of the poison left in his stomach, you wished to fill it so full with water as to fill up all the cracks and take the puckers out of it.

I know Suit protested against taking any more water, and said he could not possibly get any more in him; you said he could drink a quart more, and he did do it; some one remarked to Suit he was pretty well set up, Suit remarked he was pretty well set down. This remark was made in the hall, and, when this was repeated to you, you, Sayre, said, "That don't talk much like a drunken man," and said, "Suit, I don't believe you are drunk anyhow; I believe you are poisoned."

I remember of your talking with some gentlemen in the room, and was asking what we had been eating; you soon found out we had been eating partridge, and, as I understood, you came to the conclusion the partridge was poisoned. I do not remember of telling you, or hearing any one else tell you, that Dr. Ruppaner had been to see us before you came; I do remember of you both being in the room at the same time.

Very respectfully, your friend,

R. G. GRIMES.

SILVER HILL, PRINCE GEORGE'S COUNTY, MARYLAND, }
April 30, 1870. }

MY DEAR DR.: Yours of the 19th, directed to me at Louisville, Ky., reached me yesterday, in which you ask the following questions: "Was Dr. Ruppaner in the room at the time of my arrival?" I answer, he was not. "Did I give you an emetic of warm water before I went into the drug-store?" I am under the impression you did. "Did you tell me that Dr. Ruppaner had already prescribed for you before I brought him in with me from the drug-store?" In answer to which I wish to say my memory was very much affected, being, at the time, on the point of death. But, as well as I can remember, I think your prescription of warm water was the first I took, which was given in the absence of Dr. Ruppaner, who had left the room for the drug-store. I believe I have answered all your questions; now I wish to add a word or two regarding the letter I gave Dr. Ruppaner. He called on me several times at the Fifth Avenue Hotel, and asked me for a letter giving the facts in the poisoning case. I refused at first, and at the same time stated my reasons, which were, that I did not wish to be mixed up in any newspaper controversy. He then pledged his honor as a gentleman that the letter should not be used in print, or in any other way, without my knowledge and consent. He also stated he wanted the letter to show some friends who were interested in the case.

I have known Dr. Ruppaner several years, having boarded with him in the Fifth Avenue Hotel two or three years. He would be about the last doctor in New York I would call to my bedside if I thought my life was in danger. When I was poisoned and found myself fast approaching death, I thought any doctor was better than none; therefore, I had him called in, but at the same time dispatched two or three waiters for you. When you entered the room, I was satisfied my life would be saved.

Yours, very respectfully,
S. T. SUIT.

TO DR. LEWIS A. SAYRE, New York.

The following was on a slip of paper, and was enclosed with the preceding letter:

MY DEAR FRIEND: I very much regret having given Dr. Ruppaner the letter I did. He has proven himself unworthy of the confidence of any gentleman, and I shall tell him so when I see him. I have given you a plain statement of facts as I remember them; if you can better the letter, let me know, and I shall do all I can to place you where you belong, and to let the public know what I think of Dr. Ruppaner. . . .

As ever, your friend,
S. T. SUIT.

In referring to this subject in my introductory lecture at Bellevue Hospital, and about which the doctor makes such strong comment, it was done for the purpose of impressing upon the students the necessity of a knowledge of all the different departments of our profession. In both of these cases, the lecture and the letter, I did not refer to Dr. Ruppaner, for the simple reason that *I knew nothing of his having any ideas, or of his having prescribed for these patients previous to my being called to see them.* Mr. Suit was one of my old patients; two hurried messengers coming within a very few minutes of each other, and almost immediately, as proved by their testimony, and by his letter after his having been taken sick, upon my arrival I found no doctor present; *was not informed that any doctor had been there, either by him or any of his friends*; and I, therefore, had not the remotest idea that Dr. Ruppaner, or any other physician, had seen the patients previous to my arrival; and the first knowledge that I had that Dr. Ruppaner had seen them was by *his* informing me of the fact when he met me in the drug-store, where he says he went and found me. In that conversation he informed me

that he considered them drunk, or suffering from the effects of liquor; and consequently, on my referring to the partridge poisoning case, I had no more idea that the doctor had any thing to do with the treatment of them as a case of poisoning, than I had of the name of the servant who called me to attend them, and therefore did not refer to his name, as it did not occur to me that it had any claim to mention.

For two years past, since this occurrence, Dr. Ruppaner has seen me frequently, and has never spoken of the subject, or *even referred* to it in a single instance; on the contrary, I have letters in which he refers to me with the highest consideration and, warmest friendship, and according to his own published account, insisted to Captain Bigelow and his friends that I should be the surgeon to perform the operation upon him, although other surgeons were mentioned and preferred; and it is the most extraordinary thing that, if he felt that I had done him this great injustice and wrong, he should have been so warm an admirer, so distinguished a friend, and should have attempted to force upon Captain Bigelow a person whom he now confesses to have held for two years in such contempt, and from whom he had suffered such great professional injury.

There are many more points on which I could have dwelt in answer to Dr. Ruppaner's pamphlet, but, as I have distinctly proved his entire want of veracity in the Bigelow case, and his malicious and wilful professional injustice in the poisoning case, I have not thought it advisable to prolong this answer.

LEWIS A. SAYRE, M. D.

June 1, 1870.

